

BLANCHESTER LOCAL SCHOOL DISTRICT  
BLANCHESTER, OHIO 45107

INTERDISTRICT OPEN ENROLLMENT APPLICATION  
2025-2026

NAME \_\_\_\_\_ SS# \_\_\_\_\_

STUDENT BIRTH DATE \_\_\_\_\_ STUDENT CITY OF BIRTH \_\_\_\_\_

PARENT/GUARDIAN NAME \_\_\_\_\_ MOTHER'S MAIDEN NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

(Proof of residency required at time of application)

TELEPHONE NUMBER \_\_\_\_\_ (HOME) \_\_\_\_\_ (CELL/WORK)

PRESENT SCHOOL DISTRICT OF RESIDENCE \_\_\_\_\_

SCHOOL BUILDING PRESENTLY ATTENDING \_\_\_\_\_

WAS THE STUDENT SUSPENDED/EXPELLED 10 CONSECUTIVE DAYS OR MORE IN THE TERM PRIOR TO APPLICATION?

\_\_\_\_\_

GRADE LEVEL OF STUDENT IN 2025-2026 \_\_\_\_\_

IS STUDENT ENROLLED IN ANY SPECIAL EDUCATION OR TUTORIAL PROGRAMS? \_\_\_\_\_

IF YES, PLEASE EXPLAIN \_\_\_\_\_

IF STUDENT WILL BE IN GRADES 9-12, LIST ALL COURSES REQUESTED FOR 2025-2026

\_\_\_\_\_  
\_\_\_\_\_

For high school students please attach a copy of all prior high school credits/transcripts to this application. (These will only be used to assist with scheduling high school classes.)

\_\_\_\_\_

PARENT/GUARDIAN SIGNATURE

DATE

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(FOR OFFICE USE ONLY)

RECEIVED BY \_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_

APPLICATION APPROVED \_\_\_\_\_ REJECTED \_\_\_\_\_

REASON(S) \_\_\_\_\_

SIGNATURE OF OFFICIAL \_\_\_\_\_ DATE \_\_\_\_\_

No student shall be denied admission to the Blanchester Local School District or to a particular course or instruction program or otherwise discriminated against for reason of race, color, national origin, sex, disability, or any other basis of unlawful discrimination.

**NOTE Falsification of any of the above information may result in the voiding of this application.**

**CURRENT STUDENTS PLEASE RETURN TO BLANCHESTER BOARD OF EDUCATION BY MAY 16, 2025**

**NEW STUDENT APPLICATIONS - PLEASE RETURN TO THE BLANCHESTER BOARD OF EDUCATION BY JUNE 15, 2025**